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PATENT AND TRADEMARK OFFICE <b>REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) A15 DIV(14)
To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	In re Application of Yadav, et al.	
	Application No. 10/698,577	Filed 10/31/03
	For: Nanomaterials With Unusual Properties	
	Art Unit 1118	Examiner Hoa T. Le

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows (check time period desired):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120.00	\$ 60.00	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	\$ 225.00	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	<u>\$1,020.00</u>	<u>\$ 510.00</u>	<u>\$ 1,020</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	<u>\$1,590.00</u>	<u>\$ 795.00</u>	<u>\$ 0</u>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	<u>\$2,160.00</u>	<u>\$1,080.00</u>	<u>\$ 0</u>

- Applicant claims small entity status . See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123. I have enclosed a duplicate copy of this sheet.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the       applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  
 attorney or agent of record. Registration Number 44,866  
 attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 44,866.

3/31/06

Date

  
SIGNATURE

Kent A. Lembke

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of one form is submitted.